



Sexual Violence Analysis

2017 New Jersey Behavioral Risk Factor Survey



RAPE PREVENTION AND EDUCATION (RPE) GRANT IN NEW JERSEY BRIEF

This brief provides data about sexual violence in New Jersey using responses from the 2017 NJ Behavioral Risk Factor Survey (NJBRFS). This survey provides one of the first population-based prevalence estimates of sexual violence and related health outcomes in New Jersey. Data included in this brief are from 4,565 individuals who responded to questions regarding their experiences of sexual violence. This brief focuses on their experiences within the past 12 months. Estimates are weighted to reflect the general population of NJ.[†]

Disparities Among Survivors

New Jersey women were **two times** more likely to experience sexual violence than men within the previous 12 months.

Also, the odds of experiencing sexual violence is not the same for all races.



Sexual violence* is defined here as rape and sexual harm, or any type of sexual act on a person who does not want or has not consented to the act. This definition includes survivors who are forced to penetrate a perpetrator, sexual coercion, and any other unwanted sexual experiences. A **Survivor** is someone who has experienced sexual violence and a **Perpetrator** is a person who commits the violence.

Perpetrators' Characteristics

Gender	Number	Relationship
94% of perpetrators of sexual violence were men	91% of survivors' most recent experience of sexual violence was by a SINGLE perpetrator	87% of survivors' most recent experience of sexual violence was by someone they knew

Most survivors (**87%**) of sexual violence knew their perpetrator. **Fifty percent** of perpetrators were a family member, while **36.5%** of perpetrators were a person in power, such as a boss, teacher, coach, clergy, doctor, or caregiver, or an acquaintance of the survivor of sexual violence.

[†]More information on NJBRFS data collection methodology can be accessed at <https://www.nj.gov/health/chs/njbrfs/>

*The CDC defines sexual violence as "rape" (completed or attempted forced penetration or alcohol- or drug-facilitated penetration) and sexual violence other than rape, including being made to penetrate a perpetrator, sexual coercion (non-physically pressured unwanted penetration), unwanted sexual contact (e.g., kissing or fondling), and non-contact unwanted sexual experiences (e.g., being flashed or forced to view sexually explicit media)" (Brieding, 2014).



Health Factors Associated with Sexual Violence

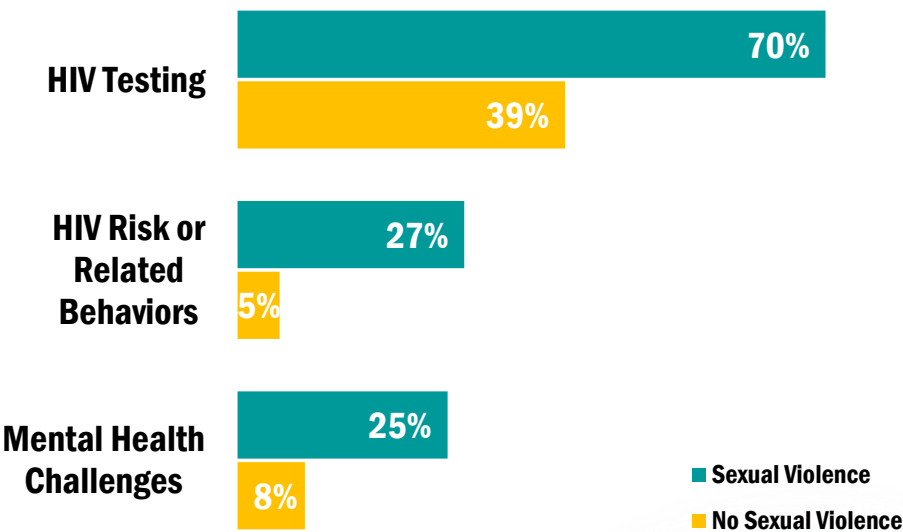
Of those who experienced sexual violence in the last 12 months...

- **70%** had been **tested for HIV** at some point in their lives.
- **27%** were more likely to report engaging in **HIV risk behaviors**, (including IV drug use, exchanging of money or drugs for sex, having had anal sex without a condom, and/or having had 4 or more sex partners), and/or **receiving treatment for Sexually Transmitted Infections (STIs)**.
- **25%** experienced **mental health challenges** (including stress, depression, and problems with emotions) during the past 30 days.

Of those who did **NOT** experience sexual violence...

- **39%** had been **tested for HIV** at some point in their lives.
- **5%** were more likely to report in engaging in **HIV risk behaviors** and/or **receiving treatment for STIs**.
- **8%** experienced **mental health challenges** during the past 30 days.

People who **experienced sexual violence** were more likely to report poor health outcomes and being tested for HIV than those who **did NOT experience sexual violence**.



About RPE & NJBRFS

What is happening in New Jersey to address sexual violence?

The Centers for Disease Control and Prevention (CDC)'s New Jersey Rape Prevention and Education (RPE) grant in New Jersey, implemented by the New Jersey Department of Children and Families Division on Women, addresses health inequities and disparities in sexual violence by focusing on Strengthening Leadership Opportunities for Girls through Culturally-Responsive Leadership Opportunities, Creating Protective Environments for LGBTQ+ Communities, and Engaging Men and Boys. This includes a focus on decreasing rates of sexual violence perpetration and victimization, as well as disparities in sexual violence victimization across New Jersey by race, ethnicity, class, gender, sexual orientation, age, and disabilities. This is done through engagement and collaboration with community-based public and private stakeholders and partners, with a focus on health equity and through an intersectional approach. For more information, please contact: dow@dcf.nj.gov.

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New Jersey Behavioral Risk Factor Survey (NJBRFS)

The Centers for Disease Control and Prevention (CDC) Behavioral Risk Factor Surveillance System (BRFSS) is a survey administered in the United States (US) and participating US territories. It is an ongoing telephone survey designed to collect data on health-related risk behaviors, chronic health conditions, and use of preventive services from the noninstitutionalized 18 and over adult population. The New Jersey Behavioral Risk Factor Survey (NJBRFS) is partially funded by the CDC, and works within the national Behavioral Risk Factor Surveillance System (BRFSS). NJBRFS is an ongoing health survey of NJ residents administered by the New Jersey Department of Health (NJDOH).

Reference

Breiding, M. J. (2014). Prevalence and characteristics of sexual violence, stalking, and intimate partner violence victimization—National Intimate Partner and Sexual Violence Survey, United States, 2011. Morbidity and mortality weekly report. Surveillance summaries (Washington, DC: 2002), 63(8), 1

